## Prospective Comparative Study of Gefitinib Therapy for Postoperative Recurrent Non-small Cell Lung Cancer with Epidermal Growth Factor Receptor Mutations

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Abstract: Purpose: This study was designed to investigate the efficacy and feasibility of gefitinib for the treatment of recurrent non-small cell lung cancer ( NSCLC ) patients after surgery with epidermal growth factor receptor (EGFR) mutations in comparison to conventional chemotherapy for those without EGFR mutations. Patients and Methods: The EGFR gene status of the recurrent NSCLC patients after surgery obtained from formalin-fixed and paraffin-embedded surgical specimens was examined by the DNA sequencing of EGFR exons 18 to 21. Patients with EGFR mutations received gefitinib (250 mg/day), and those without EGFR mutations received conventional chemotherapy. The response rate (RR), disease control rate (DCR), progression free survival (PFS), and toxicity profile were all assessed prospectively. Results: Between October 2005 and May 2007, 17 patients were examined for the EGFR status, and 7 patients (41%) harbored EGFR mutations. EGFR mutations were significantly more frequently found in females (P = 0.021) and never smokers (P = 0.021). Seven patients with EGFR mutations received gefitinib therapy and six patients without EGFR mutations received conventional chemotherapy. The response rate at 3 months in the gefitinib treated patients was 42.9% (95% CI, 6.2% to 79.6%), and the disease control rate was 71.4% 95% CI, 38% to 100%). The median PFS of these patients was 10.9 months (1.9 to 19.8 months). No life-threatening toxicity was observed. While these parameters in the conventional chemotherapy group were 0%, 16.7% 95% CI, 0% to 46.5%), and 5.4 months (1.1 to 14.2 months), respectively. Conclusion: Treatment with gefitinib for the recurrent NSCLC patients with EGFR mutations was thus found to achieve a high efficacy with acceptable toxicity.

Key words: Gefitinib, Non-small cell lung cancer, Prospective study, EGFR mutations, Post-operative recurrence